

land and water rights are not affected by its enactment, nor are any rights-of-way or rights of use that are currently permitted.

Lastly, the Pala Band may not conduct any gaming activities on the land.

Madam Speaker, I want to thank Representative ISSA for championing this bipartisan legislation, and I urge its quick adoption. I reserve the balance of my time.

Mr. WESTERMAN. Madam Speaker, I yield myself such time as I may consume.

Madam Speaker, I rise in support of H.R. 1975, the Pala Band of Mission Indians Land Transfer Act.

This bill would place approximately 721 acres of land located in San Diego, California, into trust for the Pala Band of Mission Indians.

As Ms. LEGER FERNANDEZ said, gaming pursuant to the Indian Gaming Regulatory Act is prohibited on the lands to be placed into trust by this legislation. In the early 1990s, San Diego, California, voters approved a plan to establish the Gregory Canyon landfill project, but the landfill process fell into bankruptcy and the development company sold a portion of the land to the Tribe for cultural preservation. The Tribe is now requesting to have that land placed into trust to be part of the Tribe's reservation.

I want to thank Mr. ISSA for his leadership on this issue, and I again urge adoption of the measure, and I reserve the balance of my time.

Ms. LEGER FERNANDEZ. Madam Speaker, I reserve the balance of my time.

Mr. WESTERMAN. Madam Speaker, I yield such time as he may consume to the gentleman from California (Mr. ISSA).

Mr. ISSA. Madam Speaker, I thank the gentleman for yielding. As the chair and ranking member said, this is bipartisan, and I am sure will be bicameral, and, in fact, it is necessary because not only is H.R. 1975 necessary in order to put land in trust, but we, for more than 20 years now, have had to put most land that gets into trust in trust because of action by the Congress.

I want to take this opportunity on behalf of the 18 Tribes that I represent and have represented for most of my 20 years in Congress and say that this is the kind of bill that I hope we will pass further legislation to make unnecessary. The essential right of our first people to reclaim their ancestral land and have it placed into trust on a pro forma basis, on a nearly automatic basis, should not require action by Congress time and time again.

The Pala Band of Indians had to buy this land at their own expense in order to gift it, essentially, to the Federal Government. They do so because of the importance of their ancestral land and their pride in the people they are and the people they have been since before man, Western man, walked into California and disrupted their lives.

So I am proud that, once again, we are putting land in trust. I am proud of the Pala Indians who worked for more than 30 years to recapture this land, to keep it from being effectively taken away in perpetuity. They have done the right thing.

They have reinvested their hard-earned money, in fact, on putting, for their nearly 1,000 members, together a future of Tribal land in which the public can be aware will be taken care of better than it was under private land.

It is interesting to me that, in fact, we have had to get assurances that the Tribe would not use this for gaming, which is understood. But the idea that they cannot use it—they do not, in fact, regain their water rights that they historically would have, and others—quite frankly, is a giveaway that should not be necessary.

I am happy to take the opportunity to thank the chairman and ranking member, but I ask that we really take a hard look at the inefficiency of the system that has caused every single land in trust that has been done for my 18 Tribes, or many of my 18 Tribes over 20 years, to require this action.

I believe we should streamline the process to make the bias in favor of the Tribe's right to reclaim their land, to place it, in fact, into what is trust land, which is another name for it belongs to the Federal Government even though it has been bought out of the hardworking representatives in my district; in this case, Pala.

So I want to thank the gentleman for moving this. I believe this is non-controversial. I know I brought up a point that is more controversial which is getting the bureaucracy to do a job they should do on behalf of Tribes throughout the United States. As somebody who has been honored to represent much of Indian Country in California, I hope I speak accurately for all 18 Tribes that they believe that what was theirs and is theirs again, should be placed in trust as soon as possible.

I thank the gentleman for yielding.

Mr. WESTERMAN. Madam Speaker, I thank the gentleman for his advocacy on the part of his constituents. I do again urge adoption of this.

I am ready to close, and I yield back the balance of my time.

Ms. LEGER FERNANDEZ. Madam Speaker, I do want to thank Representative ISSA, Representative WESTERMAN, and Chair GRIJALVA for moving this bipartisan bill forward and taking the action that is required at this time to ensure that the Pala Band of Indians can, indeed, control this land for their sacred and cultural sites.

Madam Speaker, I urge all of my colleagues to support the bill, and I yield back the balance of my time.

The SPEAKER pro tempore. The question is on the motion offered by the gentlewoman from New Mexico (Ms. LEGER FERNANDEZ) that the House suspend the rules and pass the bill, H.R. 1975.

The question was taken.

The SPEAKER pro tempore. In the opinion of the Chair, two-thirds being in the affirmative, the ayes have it.

Mr. ROY. Madam Speaker, on that I demand the yeas and nays.

The SPEAKER pro tempore. Pursuant to section 3(s) of House Resolution 8, the yeas and nays are ordered.

Pursuant to clause 8 of rule XX, further proceedings on this motion are postponed.

URBAN INDIAN HEALTH CONFER ACT

Ms. LEGER FERNANDEZ. Madam Speaker, I move to suspend the rules and pass the bill (H.R. 5221) to amend the Indian Health Care Improvement Act to establish an urban Indian organization confer policy for the Department of Health and Human Services.

The Clerk read the title of the bill.

The text of the bill is as follows:

H.R. 5221

Be it enacted by the Senate and House of Representatives of the United States of America in Congress assembled,

SECTION 1. SHORT TITLE.

This Act may be cited as the "Urban Indian Health Confer Act".

SEC. 2. URBAN INDIAN ORGANIZATION CONFER POLICY.

Section 514(b) of the Indian Health Care Improvement Act (25 U.S.C. 1660d) is amended to read as follows:

"(b) REQUIREMENT.—The Secretary shall ensure that the Service and the other agencies and offices of the Department confer, to the maximum extent practicable, with urban Indian organizations in carrying out—

"(1) this Act; and

"(2) other provisions of law relating to Indian health care.".

The SPEAKER pro tempore. Pursuant to the rule, the gentlewoman from New Mexico (Ms. LEGER FERNANDEZ) and the gentleman from Arkansas (Mr. WESTERMAN) each will control 20 minutes.

The Chair recognizes the gentlewoman from New Mexico.

GENERAL LEAVE

Ms. LEGER FERNANDEZ. Madam Speaker, I ask unanimous consent that all Members may have 5 legislative days in which to revise and extend their remarks and include any extraneous material on the measure under consideration.

The SPEAKER pro tempore. Is there objection to the request of the gentlewoman from New Mexico?

There was no objection.

Ms. LEGER FERNANDEZ. Madam Speaker, I yield myself such time as I may consume.

Madam Speaker, H.R. 5221, the Urban Indian Health Confer Act, introduced by Natural Resources Chair RAÚL GRIJALVA from Arizona will require agencies and offices within the United States Department of Health and Human Services, or HHS, to confer with Urban Indian Organizations, or UIOs, on policies and initiatives related to healthcare for American Indians and Alaska Natives.

The Indian Health Care Improvement Act established Urban Indian Organizations in response to many American Indians and Alaska Natives living in urban areas and seeking healthcare. Today, approximately 70 percent of all American Indians and Alaska Natives live in urban areas.

The Indian Health Service supports contracts and grants to 41 UIO programs that offer medical services ranging from dental care, optometry, pharmacy services, and community services, such as alcohol and drug abuse prevention, nutrition education, and counseling.

An urban confer policy at HHS will serve as the preferred method of dialogue between the agency and UIOs. Currently, the Indian Health Service is the only agency that maintains a legal obligation to confer with UIOs. This limited scope serves as a barrier for UIOs to communicate with other agencies and offices within HHS.

During the COVID-19 pandemic, the issues with this limited confer policy were, sadly, highlighted. Despite congressional and Tribal support for the inclusion of UIOs and the agency's vaccine allocations, HHS refrained from initiating communications with them. As a result, UIOs were unable to provide input on the vaccine rollout allocations until the deadline, which delayed the vaccine's distribution to many urban American Indians and Alaska Natives.

The failure to communicate with UIOs about healthcare policies that impact urban Indian communities is inconsistent with the Federal trust responsibility and contrary to sound public health policy.

H.R. 5221 will establish direct lines of communication for UIOs across the entire Department and ensure that urban American Indians and Alaska Natives are aware of significant healthcare policy changes.

I want to thank Chair GRIJALVA for championing this critical bipartisan legislation. I am pleased to be a co-sponsor of the bill and I urge quick adoption. I reserve the balance of my time.

HOUSE OF REPRESENTATIVES,
COMMITTEE ON NATURAL RESOURCES,
Washington, DC, October 26, 2021.

Hon. ROBERT C. "BOBBY" SCOTT,
Chair, Committee on Education and Labor,
House of Representatives, Washington, DC.

DEAR CHAIR SCOTT, I write to you concerning H.R. 5221, the "Urban Indian Health Confer Act."

I appreciate your willingness to work cooperatively on this legislation. I recognize that the bill contains provisions that fall within the jurisdiction of the Committee on Education and Labor. I acknowledge that your Committee will not formally consider H.R. 5221 and agree that the inaction of your Committee with respect to the bill does not waive any future jurisdictional claim over the matters contained in the bill that fall within your Committee's Rule X jurisdiction.

I am pleased to support your request to name members of the Committee on Education and Labor to any conference committee to consider such provisions. I will en-

sure that our exchange of letters is included in the Committee Report and the Congressional Record during floor consideration of the bill. I appreciate your cooperation regarding this legislation and look forward to continuing to work with you as this measure moves through the legislative process.

Sincerely,

RAÚL M. GRIJALVA,
Chair, Committee on Natural Resources.

HOUSE OF REPRESENTATIVES,
COMMITTEE ON EDUCATION AND LABOR,
Washington, DC, October 21, 2021.

Hon. RAÚL M. GRIJALVA,
Chairman, Committee on Natural Resources,
Washington, DC.

DEAR CHAIRMAN GRIJALVA: I write concerning H.R. 5221, the Urban Indian Health Confer Act. This bill was primarily referred to the Committee on Natural Resources, and additionally to the Committee on Education and Labor. As a result of Leadership and the Committee on Natural Resources having consulted with me concerning this bill generally, I agree to forgo formal consideration of the bill so the bill may proceed expeditiously to the House floor.

The Committee on Education and Labor takes this action with our mutual understanding that by forgoing formal consideration of H.R. 5221, we do not waive any jurisdiction over the subject matter contained in this or similar legislation, and we will be appropriately consulted and involved as the bill or similar legislation moves forward so we may address any remaining issues within our Rule X jurisdiction. I also request that you support my request to name members of the Committee on Education and Labor to any conference committee to consider such provisions.

Finally, I would appreciate a response confirming this understanding and ask that a copy of our exchange of letters on this matter be included in the Committee Report filed by the Committee on Natural Resources and in the Congressional Record during floor consideration of H.R. 5221.

Very truly yours,

ROBERT C. "BOBBY" SCOTT,
Chairman.

HOUSE OF REPRESENTATIVES,
COMMITTEE ON NATURAL RESOURCES,
Washington, DC, November 1, 2021.

Hon. FRANK PALLONE,
Chair, Committee on Energy and Commerce,
House of Representatives, Washington, DC.

DEAR CHAIR PALLONE: I write to you concerning H.R. 5221, the "Urban Indian Health Confer Act."

I appreciate your willingness to work cooperatively on this legislation. I recognize that the bill contains provisions that fall within the jurisdiction of the Committee on Energy and Commerce. I acknowledge that your Committee will not formally consider H.R. 5221 and agree that the inaction of your Committee with respect to the bill does not waive any future jurisdictional claim over the matters contained in the bill that fall within your Committee's Rule X jurisdiction.

I am pleased to support your request to name members of the Committee on Energy and Commerce to any conference committee to consider such provisions. I will ensure that our exchange of letters is included in the Committee Report and the *Congressional Record* during floor consideration of the bill. I appreciate your cooperation regarding this legislation and look forward to continuing to work with you as this measure moves through the legislative process.

Sincerely,

RAÚL M. GRIJALVA,
Chair, Committee on Natural Resources.

HOUSE OF REPRESENTATIVES,
COMMITTEE ON ENERGY AND COMMERCE,
Washington, DC, November 1, 2021.

Hon. RAÚL M. GRIJALVA,
Chairman, Committee on Natural Resources,
Washington, DC.

DEAR CHAIRMAN GRIJALVA: I write concerning H.R. 5221, the "Urban Indian Health Confer Act," which was additionally referred to the Committee on Energy and Commerce.

In recognition of the desire to expedite consideration of H.R. 5221, the Committee agrees to waive formal consideration of the bill as to provisions that fall within the Rule X jurisdiction of the Committee. The Committee takes this action with the mutual understanding that we do not waive any jurisdiction over the subject matter contained in this or similar legislation, and that the Committee will be appropriately consulted and involved as this bill or similar legislation moves forward so that we may address any remaining issues within our jurisdiction. I also request that you support my request to name members of the Committee to any conference committee to consider such provisions.

Finally, I would appreciate the inclusion of this letter into the Congressional Record during floor consideration of the measure.

Sincerely,

FRANK PALLONE, JR.,
Chairman.

□ 1645

Mr. WESTERMAN. Madam Speaker, I yield myself such time as I may consume.

Madam Speaker, today, the Indian Health Services Urban Indian Health Program consists of 41 nonprofit programs nationwide.

These programs are funded through grants and contracts from the Indian Health Service, pursuant to the authorities of the Indian Health Care Improvement Act.

Urban Indian health organizations that participate in the program provide services such as information, outreach and referral, dental services, primary care services, community health, and other important services.

In 2010, as part of the Patient Protection and Affordable Care Act, Congress reauthorized and amended the Indian Health Care Improvement Act by adding a requirement that the Indian Health Service confer with urban Indian organizations.

In 2014, the Indian Health Service established a policy to guide when the Indian Health Service seeks input from Urban Indian Organizations on health policy matters.

Other agencies within the Department of Health and Human Services that serve American Indians and Alaska Natives, such as the Centers for Medicare and Medicaid Services, the Centers for Disease Control and Prevention, and the Substance Abuse and Mental Health Services Administration, and others, do not have policies regarding conferring with Urban Indian Organizations.

Throughout the COVID-19 pandemic, Urban Indian health organizations were provided no notice that they were required to make selections for COVID-19 vaccine distribution until the day of the deadline imposed by an agency.

This resulted in Urban Indian Organizations struggling to provide accurate responses to changing public health decisions for Indians living in urban areas.

This bill would amend the Indian Health Care Improvement Act to require all agencies within the Department of Health and Human Services to establish an urban Indian organization confer policy.

I thank the sponsor of this legislation, Chairman GRIJALVA, and I reserve the balance of my time.

Ms. LEGER FERNANDEZ. Madam Speaker, I yield as much time as he may consume to the gentleman from Arizona (Mr. GRIJALVA), the chairman of the Natural Resources Committee.

Mr. GRIJALVA. Madam Speaker, as stated before, today marks the first day of National Native American Heritage Month.

I want to thank the gentlewoman from New Mexico, the chair of the Subcommittee on Indigenous Peoples of the United States, Ranking Member WESTERMAN, and Ranking Member YOUNG for putting a package together for Congress to vote specifically on significant bipartisan pieces of legislation that deal specifically with Indian Country. I think it is noteworthy and symbolic, and as you see these pieces of legislation, very much necessary. I want to extend my thanks to all of them for that.

While it is a time to celebrate the histories and achievements of Native Americans in this country, it is also a time for Congress to fully recognize the trust and treaty obligations the U.S. Government owes to Tribal governments and to indigenous people in our country.

Ensuring equity for Tribal healthcare entities is an essential part of the Federal trust responsibility, which is the reason that I am proud to sponsor H.R. 5221, the Urban Indian Health Confer Act.

The accessible and culturally competent healthcare services that Indian Health Services provides to Tribal communities are critical to ensuring their well-being.

As stated by the chairwoman, over 70 percent of American Indians and Alaska Natives began seeking healthcare outside of Tribal jurisdictions in our cities and nonreservation communities across this country. Urban Indian Organizations, UIOs, were created to fill that gap.

Today, IHS supports 41 of these programs that offer vital medical services, including dental care, mental health support, optometry services, and social services, such as nutrition, education, and home healthcare.

Although UIOs have been recognized as critical components of the Tribal healthcare system, they continue to experience parity and recognition of purpose and the attention that they deserve for the services they provide to indigenous people and the family services they provide to nonreservation Native people across this country.

At the Department of Health and Human Services, only IHS maintains an obligation to confer with UIOs regarding any healthcare policy changes that may affect urban Indian communities. This issue became glaringly obvious during the COVID-19 pandemic, when the Department excluded UIOs in the vaccine rollout discussions, leaving urban Indian communities among the last to receive vaccine allocations through their local urban Indian centers.

As a Member of Congress who represents a UIO, the Tucson Indian Center, I am grateful for their essential work to keep Tribal communities safe and healthy, especially as we go into a post-COVID-19 pandemic era.

H.R. 5221 will establish direct lines of communication between UIOs and the Department of Health and Human Services so that UIOs have a seat at the table for all relevant Tribal healthcare policy changes.

Ensuring that UIOs achieve equity at the Department is sound public health policy and upholds the U.S. Government's Federal trust responsibility to Indian Country. H.R. 5221 represents a much-needed change.

Madam Speaker, I urge the quick adoption of this bipartisan legislation.

Mr. WESTERMAN. Madam Speaker, I am ready to close, and I yield back the balance of my time.

Ms. LEGER FERNANDEZ. Madam Speaker, I want to, once again, thank Ranking Member WESTERMAN, as well as Ranking Member DON YOUNG and Chair GRIJALVA, for bringing forth this legislation. It addresses immediately something that we saw that had lingered, but the pandemic shown its ugly light on what happens when we let things linger and do not deal with them. This legislation fixes that. It highlights the importance of communication, of cooperation, and the confer policy that must be adopted across all of our agencies, not only at HHS.

Madam Speaker, I urge my colleagues to support this legislation, and I yield back the balance of my time.

The SPEAKER pro tempore. The question is on the motion offered by the gentlewoman from New Mexico (Ms. LEGER FERNANDEZ) that the House suspend the rules and pass the bill, H.R. 5221.

The question was taken.

The SPEAKER pro tempore. In the opinion of the Chair, two-thirds being in the affirmative, the ayes have it.

Mr. ROY. Madam Speaker, on that I demand the yeas and nays.

The SPEAKER pro tempore. Pursuant to section 3(s) of House Resolution 8, the yeas and nays are ordered.

Pursuant to clause 8 of rule XX, further proceedings on this motion are postponed.

BEAR RIVER NATIONAL HERITAGE AREA STUDY ACT

Ms. LEGER FERNANDEZ. Madam Speaker, I move to suspend the rules

and pass the bill (H.R. 3616) to authorize the Secretary of the Interior to conduct a study to assess the suitability and feasibility of designating certain land as the Bear River National Heritage Area, and for other purposes.

The Clerk read the title of the bill.

The text of the bill is as follows:

H.R. 3616

Be it enacted by the Senate and House of Representatives of the United States of America in Congress assembled,

SECTION 1. SHORT TITLE.

This Act may be cited as the "Bear River National Heritage Area Study Act".

SEC. 2. DEFINITIONS.

In this Act:

(1) HERITAGE AREA.—The term "Heritage Area" means the Bear River National Heritage Area.

(2) SECRETARY.—The term "Secretary" means the Secretary of the Interior.

(3) STATES.—The term "States" means the States of Utah and Idaho.

(4) STUDY AREA.—The term "study area" means—

(A) areas in the States that are within the main drainage area of the Bear River;

(B) all of Cache, Box Elder, and Rich Counties in the State of Utah, and Bear Lake, Caribou, Franklin, and Oneida Counties in the State of Idaho;

(C) the following communities in Utah: Bear River, Brigham City, Corinne, Deweyville, Elwood, Fielding, Garland, Honeyville, Howell, Mantua, Perry, Plymouth, Portage, Snowville, Tremonton, Willard, Amalga, Clarkston, Cornish, Hyde Park, Hyrum, Lewiston, Logan, Mendon, Millville, Newton, Nibley, North Logan, Paradise, Providence, Richmond, River Heights, Smithfield, Trenton, Wellsville, Garden City, Laketown, Randolph, and Woodruff;

(D) the following communities in Idaho: Malad, Clifton, Dayton, Franklin, Preston, Oxford, Weston, Bancroft, Soda Springs, Grace, Bloomington, Paris, Georgetown, Montpelier, and St. Charles; and

(E) any other areas in the States that—

(i) have heritage aspects that are similar to the areas described in subparagraphs (A), (B), (C), or (D); and

(ii) are adjacent to, or in the vicinity of, those areas.

SEC. 3. STUDY.

(a) IN GENERAL.—The Secretary, in consultation with State and local organizations and governmental agencies, Tribal governments, non-profit organizations, and other appropriate entities, shall conduct a study to assess the suitability and feasibility of designating the study area as a National Heritage Area, to be known as the "Bear River National Heritage Area".

(b) REQUIREMENTS.—The study shall include analysis, documentation, and determinations on whether the study area—

(1) has an assemblage of natural, historic, and cultural resources that—

(A) represent distinctive aspects of the people and cultures of the United States;

(B) are worthy of recognition, conservation, interpretation, and continuing use; and

(C) would be best managed—

(i) through partnerships among public and private entities; and

(ii) by linking diverse and sometimes non-contiguous resources and active communities;

(2) reflects traditions, customs, beliefs, and folklore that are a valuable part of the story of the United States;

(3) provides outstanding opportunities—

(A) to conserve natural, historic, cultural, or scenic features; and